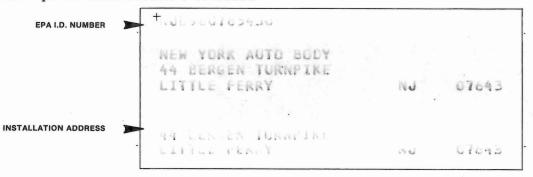


ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act(RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.



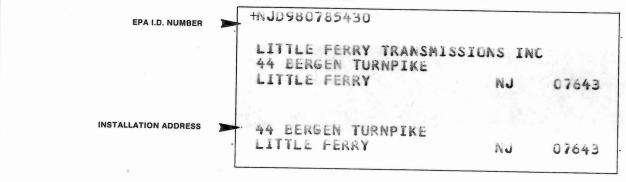
EPA Form 8700-12B (4-80)



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act(RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.



EPA Form 8700-12B (4-80)

04/03/69

CONTINUE ON REVERSE

EPA Form 8700-12 (6-80)

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY INSTRUCTIONS: If you received a preprint
INSTALLA- TION'S EPA I.D. NO. Iabel, affix it in the space at left. If any of information on the label is incorrect, draw a label through it and supply the correct information.
I. STALLATION JAN J 4 19 PH 85 in the appropriate section below. If the labe complete and correct, leave Items I, II, and
ENVIRORS PROTECTION below blank. If you did not receive a preprint label, complete all items. "Installation" mean
II. MAILING ADDRESS PLEASE PLACE LABEL IN THIS SPACE single site where hazardous waste is generat treated, stored and/or disposed of, or a tra
porter's principal place of business. Please re to the INSTRUCTIONS FOR FILING NOTI CATION III OF INSTAL- LATION (Section 3010 of the Resource Conservation a Recovery Act).
FOR OFFICIAL USE ONLY
COMMENTS
INSTALLATION'S EPA I.D. NUMBER APPROVED DATE RECEIVED (yr., mo., & day)
FNJD980785430791
I. NAME OF INSTALLATION
NEW YORK AUTO BODY
II. INSTALLATION MAILING ADDRESS
STREET OR P.O. BOX
344 RERGEN TURNPIKE
CITY OR TOWN ST. ZIP CODE
4LITTLE AERRY WJ07643
III. LOCATION OF INSTALLATION
STREET OR ROUTE NUMBER 5 SAME SAME SERVET
CITY OR TOWN ST. ZIP CODE BENEFIN 2
15 16 40 41 42 47 - 51
IV. INSTALLATION CONTACT NAME AND TITLE (last, first, & job title) PHONE NO. (area code & no.)
2 HURSA JOSEPH DWNER 201-440-1045
15 16
A. NAME OF INSTALLATION'S LEGAL OWNER
8 JO SEPA AURSA 1 1 1 1 1 1 1 1 1
(enter the appropriate letter into box) VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))
F = FEDERAL M = NON-FEDERAL C. TREAT/STORE/DISPOSE D. UNDERGROUND INJECTION
VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))
A. AIR B. RAIL C. HIGHWAY D. WATER SE. OTHER (specify):
VIII. FIRST OR SUBSEQUENT NOTIFICATION
Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification of this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.
A. FIRST NOTIFICATION B. SUBSEQUENT NOTIFICATION (complete item C)

				w	7/4
IX. DESCRIPTION	OF HAZARDOUS WASTE	S (continued from fi	ront)	1 2	- 13 14
A. HAZARDOUS WAST waste from non—spec	TES FROM NON—SPECIFIC cific sources your installation	SOURCES. Enter the fi	our—digit number from sheets if necessary.	n 40 CFR Part 261.31 fo	r each listed hazardous
Military and the part of the	2	3 110	4	5	6
Latt a trace	AL 7500 AND 61 AT 47				
23 - 26	23 - 26	23 26	23 26	23 - 26	23 - 26
7	8	9	10	11	12
	Marries and Marrie				
23 26	TES EDOM SPECIFIC SOURCE	25 - 26	23 26	23 26	23 26
specific industrial sou	TES FROM SPECIFIC SOURCE rices your installation handles	. Use additional sheets	if necessary.	-H Part 261.32 for each i	isted nazardous waste from
13	14	15	16	17	18
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19	20	21	22	23	24
		1 L 14			
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	MICAL PRODUCT HAZARD on handles which may be a ha				3 for each chemical sub-
31	32	33	34	35	36
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23 2 76	73	23 26	73 78	75 - 26	23 - 25
D. LISTED INFECTIO	JS WASTES. Enter the four-		FR Part 261.34 for ea	ch listed hazardous waste	from hospitals, veterinar
hospitals, medical an	d research laboratories your in	stallation handles. Use	additional sheets if nec	cessary.	
49	50	51	52	53	54
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5 CUADA OTEDICTIO	S OF NON-LISTED HAZARI	23 26.	23 26	23 26	25 26
	ur installation handles. (See 4)	0 CFR Parts 261.21 - 2 2. CORROSIVE		TIVE	4. TOXIC
I certify under pen attached document I believe that the st	nalty of law that I have post, and that based on my is ubmitted information is tration, including the possib	nquiry of those indi- ue, accurate, and co	viduals immediately mplete. I am aware	responsible for obtain	ining the information,
SIGNATURE //	Service of medical difference in	NAME & OFFI	CIAL TITLE (type or	print)	DATE SIGNED
1 1/10	1	1/2	IRSA PI	200	1/3/05
1 Hour	Ce	1.174	IKUTT TI	(64 ,	1/4/01

EPA Form 8700-12 (6-80) REVERSE

Send to:
EPA Region 11, Information Service Center
26 Federal Place New York, NY 10007

SEPA Notification of Hazardous Waste Activity											У	Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).								
For Official Use Only		SERVE										an	d Reco	overy	Act)					
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F NJD 98	078	54	130) "	1			8	7	0	7	2	2			100	100	13		
I. Name of Installation	on Resident		ES 3									HE								
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II. Installation Mailin	g Address		T. EEE	TIME	MARC															
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III. Location of Instal	lation																			
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IV. Installation Conta	ct		·									i				/				
	Name and Ti	tle <i>(last, fii</i>	st, and j	ob title				\$772A	E35)		Phor	ne Nu	ımber	(area	a cod	le and	l num	ber)		
HURSA	50	SE	PH		100					2	0	1	8	7		8	7 8	30		
V. Ownership		The same											0							
C	A. Name	e of Install	ation's L	egal O	wner							В	. Type	of O	wner	ship	(enter	code)		
RHURSA	Jo	SE	PH																	
VI. Type of Regulated	d Waste Act	ivity (Ma	ark 'X'	in the	appro	priat	e bo	xes.	Refe	er to	inst	truc	tions	.)						
A. Ha	zardous Waste										1000		el Acti	vities	S					
2. Transporter	□ 16.	Less than	1,000 k	g/mo.		□ 6.	Off-S _l	'X' a	cation nd ma	use ark ap	d Oil	Fuel riate	boxes	s belo	w)					
3. Treater/Storer/Disp								a. Ger	nerato	or Ma	rketii	ng to	Burn	er						
4. Underground Injection								b. Other Marketer												
5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)								□ c. Burner												
a. Generator M b. Other Marke		7.	Specif Who F	ficatio	on Use	ed Oil	Fue Oil M	l Mai	rketer the S	(or O	n sit	e Bur	ner)							
c. Burner																				
VII. Waste Fuel Burnir	ng: Type of (Combus	tion De	evice	(enter'	X' in a	lappr	opria	te box	es to	india	ate t	ype of	comi	busti	on de	vice	s) in		
which hazardous waste fuel	tility Boiler	ation usea	-		ea. see ustrial B		ctions	s tor a	tetinit				stion o							
VIII. Mode of Transpo		sporters	The state of the s			AND THE PERSON NAMED IN	е ард	oropi	riate			Juoti	idi i d	Hate						
☐ A. Air ☐ B. Rail	C. Highway		Water		E. Other															
X. First or Subsequer	nt Notificati	on		Mill																
Mark 'X' in the appropriate notification. If this is not you	box to indicate	whether	this is y	our in	stallatio	n's fir	st not	tificat	ion of	f haza	ardou	JS W	aste a	ctivit	y or	a sul	osequ	ent		
The state of the s	Troc Hotmodu	on, onto	our mat	unativi	II S LFA	ואו טו	noer	m the	spac					EDA II	D M.	an b				
A. First Notification	B. Subsequ	ent Notific	ation (ca	mplet	e item C	7					HIST	anati	ion's E	1 4 1	IVU	mber				

		and the second second	ID	- For Official Use On	
		, a to the contract			T/A 0
. Description of Ha	azardous Wastes (co				
. Hazardous Wastes fro	m Nonspecific Sources es your installation hand	Enter the four-digit nu	mber from 40 CFR Part 2	261.31 for each listed ha	azardous waste
2823217522	2	3	4	5	6
0001					
7	8	9	10	11	12
	m Specific Sources. Ent nstallation handles. Use			32 for each listed hazar	dous waste from
13	14	15	16	17	18
19	20	21	22	23	24
	20				
9					
25	26	. 27	28	29	30
Commercial Chemica	l Product Hazardous Wa	stes. Enter the four-dig	it number from 40 CFR I	Part 261.33 for each ch	emical substance
	es which may be a hazar			T T	T
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12	44	45	46	47	48
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	tes. Enter the four-digit research laboratories you				als, veterinary hos-
49	50	51	52	53	54
		NA-I-YY i- at - b			d becardous wastes
your installation handl	nlisted Hazardous Waste es. (See 40 CFR Parts 26	1.21 — 261.24)	s corresponding to the cr	naracteristics of nomiste	ed flazardous wastes
🛚 1. Ignitabl	e	2. Corrosive	3. Reacti	ve	4. Toxic
(D001)		(D002)	(D003)		(D000)
I. Certification					
I certify under pe	nalty of law that I ha hed documents, and	ve personally exan	nined and am famili	ar with the informa	ition submitted in
obtaining the info	rmation, I believe the	at the submitted inf	ormation is true, acc	curate, and complet	e. I am aware that
there are significa	ant penalties for sub	mitting false inform	nation, including the	possibility of fine a	nd imprisonment.
gnature	//		icial Title (type or print)	Dat	e Signed
		OWNER			

EPA Form 8700-12 (Rev. 11-85) Reverse

PERMITS ADMINISTRATION BRANCH

1987 JUL 22 PM 3 15

NEW YORK, NY.
AGENCY, REGION II

Please refer to the Instructions for

United States Environmental Protection Agency

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X. Description of Hazardous Wastes (c	A CONTRACTOR AND ADDRESS OF THE PARTY OF THE	Salar Salar Laboratory		
A. Hazardous Wastes from Nonspecific Sources from nonspecific sources your installation hand	s. Enter the four-digit num	ber from 40 CFR Part	261.31 for each listed	hazardous waste
1 2	3	4	5	6
DOOIL				
7 8	9	10	11	12
B. Hazardous Wastes from Specific Sources. En	nter the four-digit number	from 40 CFR Part 261	32 for each listed haz	ardous waste from
specific sources your installation handles. Use				
13 14	15	16	17	18
			BE DOMESE.	
19 20	21	22	23	24
	37-180		1 2 2	
25 26	27	28	29	30
6 6 6 40 5 71 6 6				++11
C. Commercial Chemical Product Hazardous We	astes. Enter the four-digit	number from 40 CFR	Part 261.33 for each of	chemical substance
your installation handles which may be a hazar				
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37 38	39	40	41	42
4				
43 44	45	46	47	48
POPOPP	14603	14 2 T 2	11 4 3	THE PARTY OF
D. Listed Infectious Wastes. Enter the four-digit	number from 40 CFR Part	261 34 for each bazar	dous waste from host	pitals, veterinary hos-
pitals, or medical and research laboratories you				noit, resemble 1
49 50	51	52	53	54
E. Characteristics of Nonlisted Hazardous Waste		corresponding to the cl	naracteristics of nonlis	sted hazardous wastes
your installation handles. (See 40 CFR Parts 26				
☐ 1. Ignitable ☐ (D001)	2. Corrosive (D002)	☐ 3. Reacti (D003)		☐ 4. Toxic (D000)
XI. Certification				
I certify under penalty of law that I ha this and all attached documents, and obtaining the information, I believe th there are significant penalties for sub	d that based on my in at the submitted info	equiry of those ind rmation is true, acc	ividuals immediat curate, and comple	tely responsible for etc. I am aware that
Signature		ial Title (type or print)		ate Signed
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EPA Form 8700-12 (Rev. 11-85) Reverse